

Bradley County Commission

Louie Alford, Chairman VOTING SESSION AGENDA

June 19, 2017 at noon Bradley County Courthouse

- 1. Call to order
- 2. Pledge of Allegiance
- 3. Invocation Evan Cockerham
- 4. Roll Call
- 5. Approval of Minutes
- 6. Report from County Mayor
- 7. Consent Agenda (see pages 3-82)
- 8. Reports from Committees and/or Districts
- 9. Unfinished Business
- 10. Approval of Agenda
- 11. Agenda Items
 - A. Resolution 2017-23 authorizing the County Mayor to negotiate and enter into a contract with WrightCorp, Inc. regarding information technology systems for Bradley County for a period of one year for a monthly amount of \$3,500 for managed services and \$150 per hour for emergency services (see page 83) Commissioner Milan Blake
 - B. Motion to approve the Home Grant priority list as presented by Southeast Tennessee Development District (see page 84) Commissioner Milan Blake
 - C. Resolution 2017-24 budget continuation (see page 85) Commissioner Milan Blake
 - D. Budget hearings Commissioner Milan Blake
 - E. Resolution 2017-25 to establish the election method for multi member districts in Bradley County (see page 86) Commissioner Jeff Yarber
 - F. Resolution 2017-26 consenting to the abandonment of 7th Street and the property exchange between Lee University and Bradley County Library and authorizing the Mayor to execute any and all documents to facilitate the abandonment and property exchange (see pages 87-88) Commissioner Charlotte Peak

- G. Motion to approve the final amendments of the Bradley County Schools (see pages 89-91)—Commissioner Milan Blake
- 12. Communication from the audience
- 13. Announcements
- 14. Adjourn

Next meeting: Work Session, June 26, 7pm

Upcoming Events



Bradley County Commission Louie Alford, Chairman CONSENT AGENDA June 19, 2017, at noon Bradley County Courthouse

BUDGET AMENDMENTS

- 1. <u>Agricultural Extension (see page 7)</u>
- 2. Agricultural Extension (see page 8)
- 3. <u>Health Department (see page 9)</u>
- 4. Health Department (see page 10)
- 5. <u>Health Department (see page 11)</u>
- 6. Health Department (see page 12)
- 7. Health Department (see page 13)
- 8. Health Department (see page 14)
- 9. Health Department (see page 15)
- 10. <u>EMA (see page 16)</u>
- 11. <u>EMA (see page 17)</u>
- 12. <u>Commission (see page 18)</u>
- 13. <u>Juvenile (see page 19)</u>
- 14. Fire (see page 20)
- 15. Fire (see page 21)
- 16. Fire (see page 22)
- 17. Sheriff's Office (see page 23)
- 18. Sheriff's Office (see page 24)
- 19. Sheriff's Office (see page 25)
- 20. Sheriff's Office (see page 26)
- 21. Sheriff's Office (see page 27)
- 22. Sheriff's Office (see page 28)
- 23. Sheriff's Office (see page 29)
- 24. Sheriff's Office (see page 30)
- 25. Sheriff's Office (see page 31)
- 26. Sheriff's Office (see page 32)
- 27. Sheriff's Office (see page 33)
- 28. Sheriff's Office (see page 34)
- 20. Sheriff's Office (see page 54)
- 29. <u>Sheriff's Office (see page 35)</u>
- 30. Sheriff's Office (see page 36)31. Sheriff's Office (see page 37)
- 32. Sheriff's Office (see page 38)
- 33. Sheriff's Office (see page 39)
- 34. Sheriff's Office (see page 40)
- 35. Sheriff's Office (see page 41)
- 36. Sheriff's Office (see page 42)
- 37. Sheriff's Office (see page 43)
- 38. Sheriff's Office (see page 44)

- 39. Sheriff's Office (see page 45)
- 40. Sheriff's Office (see page 46)
- 41. <u>Commission (see page 47)</u>

FINAL BUDGET AMENDMENTS

41. Final budget amendments (see pages 48-65)

REQUESTS TO DISPOSE OF ASSETS

- 42. Elections request to dispose of computer server asset #3577 (see page 66)
- 43. Data processing request to dispose of computer asset #14321 (see page 67)
- 44. Data processing request to dispose of Pentium 4 server asset #11364 (see page 68)
- 45. <u>Data processing request to dispose of Dell Optiplex computer asset #13085 (see page 69)</u>
- 46. Data processing request to dispose of Dell Optiplex computer asset #11366 (see page 70)
- 47. BCSO request to dispose of 2014 Ford Explorer asset #15070 (see pages 71-77)
- 48. <u>Juvenile request to dispose of HP Pavilion laptop asset #11597 (see page 78)</u>
- 49. Iuvenile request to dispose of GE washing machine asset #14330 (see page 79)
- 50. <u>Juvenile request to dispose of Dell Optiplex GX620 asset #119512 (see page 80)</u>
- 51. <u>Juvenile request to dispose of Dell Inspirion laptop asset #11831 (see page 81)</u>

NOTARIES PUBLIC

52. Notaries public (see page 82)

Bradley County, Tennessee

Finance Committee

County Mayor's

	Date:	6/5/2017	12:00 P.M.	Conference	e Room
D. Gary Davis		X	Charlotte	e Peak	X
Milan Blake		X	Dan Rav	wls	X
Thom Crye		X	Mike Hu	ghes	X

lter	ns discussed at this meeting:				
	g.	PAGE	MOTION	SECOND	VOTE
1	Agricultural Extension Budget Amendment	1	TC	МН	5-0-0
2	Agricultural Extension Budget Amendment	2	MH	CP	5-0-0
3	Health Department Budget Amendment	3-4	MH	CP	5-0-0
4	Health Department Budget Amendment	5-7	TC	CP	5-0-0
5	Health Department Budget Amendment	8-9	*** COMBI	NE 5,6,7***	
6	Health Department Budget Amendment	10-11			
7	Health Department Budget Amendment	12-13	CP	MH	5-0-0
8	Health Department Budget Amendment	14-16	*** COMB	NE 8, 9 ***	
9	Health Department Budget Amendment	17-8	TC	МН	5-0-0
10	EMA Budget Amendment	19-20	TC	DR	5-0-0
11	EMA Budget Amendment	21-22	CP	DR	5-0-0
12	Commission Budget Amendment	23	DR	TC	5-0-0
13	Juvenile Budget Amendment	24-25	MH	DR	5-0-0
14	Fire Dept Budget Amendment	26-27	CP	DR	5-0-0
15	Fire Dept Budget Amendment	28-32	***COMBIN	√E 15, 16***	
16	Fire Dept Budget Amendment	33-40	CP	МН	5-0-0
17	Sheriff Dept Budget Amendment	41-65	COMBINE	17, 18 ***	
18	Sheriff Dept Budget Amendment	66-68	CP	MH	5-0-0
19	Sheriff Dept Budget Amendment	69-70	**COME	BINE 19, 20,	21, 22**
20	Sheriff Dept Budget Amendment	71-72			
21	Sheriff Dept Budget Amendment	73-74			
22	Sheriff Dept Budget Amendment	75-76	CP	МН	5-0-0
23	Sheriff Dept Budget Amendment	77-79	**CON	MBINE 23, 24,	25***
24	Sheriff Dept Budget Amendment	8081			
25	Sheriff Dept Budget Amendment	82-83	CP	MH	5-0-0
26	Sheriff Dept Budget Amendment	84-89	**C0	OMBINE 26, 2	7***
27	Sheriff Dept Budget Amendment	90-94	CP	DR	5-0-0
28	Sheriff Dept Budget Amendment	95	**COMBIN	NE 28, 29, 30	31 32***
29	Sheriff Dept Budget Amendment	96			
30	Sheriff Dept Budget Amendment	97			
31	Sheriff Dept Budget Amendment	98			
32	Sheriff Dept Budget Amendment	99	CP	МН	5-0-0
33	Sheriff Dept Budget Amendment	100	**COMBINE 3	33, 34, 35, 3	6, 37 38 39**
	Sheriff Dept Budget Amendment	101			
35	Sheriff Dept Budget Amendment	102			
36	Sheriff Dept Budget Amendment	103			
37	Sheriff Dept Budget Amendment	104			
38	Sheriff Dept Budget Amendment	105			
39	Sheriff Dept Budget Amendment	106	CP	MH	5-0-0
40	Sheriff Dept Budget Amendment	107	CP	DR	5-0-0
	Commission Budget Amendment	108	MH	DR	5-0-0

commendations to be made to full Commission:	1 1			
	PAGE			
Agricultural Extension Budget Amendment	1	TC	МН	5-0-0
Agricultural Extension Budget Amendment	2	мн	CP	5-0-0
Health Department Budget Amendment	3-4	MH	CP	5-0-0
Health Department Budget Amendment	5-7	TC	CP	5-0-0
Health Department Budget Amendment	8-9	*** COMBI	NE 5,6,7***	
Health Department Budget Amendment	10-11			
Health Department Budget Amendment	12-13	CP	мн	5-0-0
Health Department Budget Amendment	14-16	*** COMB	INE 8, 9 ***	
Health Department Budget Amendment	17-8	TC	MH	5-0-0
	19-20	TC	DR	5-0-0
EMA Budget Amendment	21-22	CP	DR	5-0-0
	23	DR	TC	5-0-0
	24-25	MH	DR	5-0-0
	26-27	CP	DR	5-0-0
Fire Dept Budget Amendment	28-32	***COMBIN	NE 15, 16***	
	33-40	CP	MH	5-0-0
	41-65	COMBINE	17, 18 ***	
	66-68	CP	мн	5-0-0
	69-70	**COME	BINE 19, 20,	21, 22**
	71-72			
Sheriff Dept Budget Amendment	73-74			
Sheriff Dept Budget Amendment	75-76	CP	MH	5-0-0
Sheriff Dept Budget Amendment	77-79	**CON	ABINE 23, 24	, 25***
Sheriff Dept Budget Amendment	8081			
Sheriff Dept Budget Amendment	82-83	CP	МН	5-0-0
	84-89	**C	OMBINE 26,	27***
	90-94	CP	DR	5-0-0
	95	**COMBI	NE 28, 29, 30	31 32***
	96			
Sheriff Dept Budget Amendment	97			
Sheriff Dept Budget Amendment	98			
Sheriff Dept Budget Amendment	99	CP	MH	5-0-0
	100	**COMBINE	33, 34, 35, 3	36, 37 38 39°
	101			
	102			
	103			
	104			
	105			
	106	CP	MH	5-0-0
	107	CP	DR	5-0-0
Sheriff Dept Budget Amendment	107	II OF		000
	Sheriff Dept Budget Amendment Sheriff Dept Budget Amendment	Agricultural Extension Budget Amendment 1 Agricultural Extension Budget Amendment 2 Health Department Budget Amendment 3-4 Health Department Budget Amendment 5-7 Health Department Budget Amendment 3-9 Health Department Budget Amendment 10-11 Health Department Budget Amendment 10-11 Health Department Budget Amendment 112-13 Health Department Budget Amendment 119-20 EMA Budget Amendment 119-20 EMA Budget Amendment 121-22 Commission Budget Amendment 121-22 Commission Budget Amendment 122-23 Juvenile Budget Amendment 123-3 Juvenile Budget Amendment 124-25 Fire Dept Budget Amendment 128-32 Fire Dept Budget Amendment 128-32 Fire Dept Budget Amendment 133-40 Sheriff Dept Budget Amendment 141-65 Sheriff Dept Budget Amendment 150-66 Sheriff Dept Budget Amendment 171-72 Sheriff Dept Budget Amendment 171-72 Sheriff Dept Budget Amendment 175-76 Sheriff Dept Budget Amendment 175-76 Sheriff Dept Budget Amendment 175-76 Sheriff Dept Budget Amendment 182-83 Sheriff Dept Budget Amendment 182-84 Sh	Agricultural Extension Budget Amendment 1 TC Agricultural Extension Budget Amendment 2 MH Health Department Budget Amendment 3-4 MH Health Department Budget Amendment 5-7 TC Health Department Budget Amendment 8-9 ***COMBI Health Department Budget Amendment 10-11 Health Department Budget Amendment 110-11 Health Department Budget Amendment 110-11 Health Department Budget Amendment 110-11 Health Department Budget Amendment 110-12 Health Department Budget Amendment 110-13 CP Health Department Budget Amendment 110-14 Health Department Budget Amendment 110-15 Health Department Budget Amendment 110-16 Health Department 110-16 Health Department 110-16 Health Department 110-11 Health Department 110-15	PAGE

Commission Voting Date: 6/19/2017

Date:	5/3/2017					
Requestor:	Agricultural Extensi	on Service			Sub Fund:	
						(If applicable)
INCREASE	/ DECREASE			Amount:	300.00	
Туре:	Expense (Revenue, Expense, Fund Ba	alance, Reserve)				
	d, number, name)	101	57100	Agricultural Extension		200.00
Line item (nui		189		Other Salaries & Wages	S	300.00
Line item (nui						
Line item (nui						
Line item (nui	mber & name)					
INCREASE]/ DECREASE			Amount:	300.00	
	E.					
Туре:	Expense					
	(Revenue, Expense, Fund Ba	alance, Reserve)				
Account (fun	d, number, name)	101	57100	Agricultural Extension		
Line item (nu	mber & name)	309		Contracts with Gov. Ag	gencies	300.00
Line item (nu	mber & name)					
Line item (nu	mber & name)					
Line item (nu	mber & name)					
Line item (nu	mber & name)					
Line item (nu	mber & name)					
Line item (nu	mber & name)					
Line item (nu	mber & name)					
	mber & name)					
Description of amend		overnment A	oencies is o	due to cost sharing with the	he University o	of Tennessee
	and software for Ex			and to copy officering with the		
Tor computers	and software for E	ttension age	111131			
FINANCE COM	O CHONNE DECOM OF	ID ATIONI.				
	AMTTEE RECOMME	NDATION.				101 1



Date:	5/17/2017					
Requestor:	Agricultural Extensi	ion Service			Sub Fund:	
•						(If applicable)
INCREASE	/ DECREASE			Amount:	7,700.00	
Туре:	Expense (Revenue, Expense, Fund Ba	nlance, Reserve)				
Account (fun	d, number, name)	101	57100	Agricultural Extensio	n Service	
Line item (nur		169		Part-Time Personnel		700.00
Line item (nur		201		Social Security		2,000.00
Line item (nur	nber & name)	204		State Retirement		5,000.00
Line item (nui	nber & name)					
	,					
INCREASE]/ DECREASE			Amount:	7,700.00	
Туре:	Expense (Revenue, Expense, Fund Ba	alance, Reserve)				
1	d, number, name)	101	57100	Agricultural Extensio	n Service	
Line item (nui	,	162		Clerical Personnel		700.00
Line item (nur	,	207		Medical Insurance		2,000.00
Line item (nur	,	790		Other Equipment (phor	ne system)	5,000.00
Line item (nur	,					
Line item (nui	mber & name)					
December of amount	mont the annual to be					
The increase i		l is due to 4.	H nrogram	assistant working an extr	ra nav neriod fo	r 4-H events
				e to increase in premium		
				on in November. This po		
				in our FY 2017-18 budge		
				be budgeted for in FY		
Approved:	7			Denied:	D	ate;

Date:	5-19-2	017				
Requestor:		pase	- Wast	ers	Sub Fund:	
,				_	(if applical	ble)
INCREASE /	DECREASE Raw	(circle one)		Amount: \$ 5	506.76	2
	(Revenue, Expense, Fund B	alance, Reserve)				
Account (fund, r Line item (numb		101 4	3190 OH ——	er General	Services Cha	iges
						\neg
INCREASE /	DECREASE	(circle one)		Amount: \$ 5	506.72	
Type:	(Revenue, Expense, Fund E	alance, Reserve)				
Account (fund, 1	number, name)	101 5	5/10 Lo	cal Hen	ach Des SE	unte
Line item (numb		355	1,000	100 Tra	nel	
Line item (numb		<u> </u>	4,506	172 Oth	n Charges	
Line item (numb	er & name)					
Line item (numb		-				_
Line item (numb	er & name)					_
Description of a	mendment (be spec		Homer J. Mos exper	naker / non to b	Program be I us of	<u></u>
FINANCE COMM	ITTEE RECOMMEND	ATION;				
Approved:			Denied:		Datc:	



Date:	May 5 2017	-				
Requestor:	Health Department				Sub Fund:	
					(If applicab	le)
uscraase	Decrease	(circle one)		Amount:	\$10,000.00	
Type:	REVENUE (Revenue, Expense, Fund B	alance, Reserve)				
Account (fun	d, number, name)		46390	Other Health & Wel	fare Grants	
Line item (nu	nmber & name)		-			
INCREASE	/ DECREASE	(circle one)		Amount:	\$10,000.00	
Туре:	Expense (Revenue, Expense, Fund B	alance, Reserve)				
Account (fun	id, number, name)	<u>101</u>	55190	Other Local Health	Services (state)	
Line item (nu	ımber & name)	504		Indirect Cost		
			-			
Grant from T	ndment (be specific): IN Department of Hunction with the City			munity accessibility to	enviromental need. Mor	ney b
FINANCE COI Approved:	MMITTEE RECOMMI	ENDATION:		Denied:		



Date:	May 5 2017					
Requestor:	Health Departmen	<u>t</u>			Sub Fund:	(If applicable)
The the care	Decrease	(circle one)		Amount:	\$300.00	
Type:	REVENUE (Revenue, Expense, Fund B	Salance, Reserve)				
Account (fur	nd, number, name)		43190	Other General Service C	Charges	
Line item (n	umber & name)		. <u>-</u>			
INCREASE	E / DECREASE	(circle one)		Amount:	\$300.00	
Туре:	Expense (Revenue, Expense, Fund E	Balance, Reserve)				
Account (fu	nd, number, name)		55110	Local Health Center		
Line item (n	number & name)	435	· -	Office Supplies \$300		
First deposit	andment (be specific): t of \$300.00 for our Total to be received			Blue Cross Blue Shield. M	Ioney is to buy	supplies fo
			-		144	
FINANCE CO	MMITTEE RECOMM	ENDATION:				
Approved:				Denied:		



Date:	May 5 2017	-				
Requestor:	Health Departmen	t		× .	Sub Fund:	
-						(If applicable)
INCREASE	Decrease	(circle one)		Amount:	\$5,933.44	
Type:	REVENUE					
	(Revenue, Expense, Fund B	alance, Reserve)				
Account (fu	nd, number, name)	_101_	43190	Other General Service	e Charges	
Line item (n	number & name)	8				
INCREPGE	Increase	(circle one)		Amount:	\$5,933.44	
Type:	Expense					
	(Revenue, Expense, Fund E	Balance, Reserve)				
Account (fu	nd, number, name)		55110	Local Health Center		-
Line item (n	number & name)	599		Other Charges	*	77
				2		
	endment (be specific): e used to cover cost	paid out of l	ine item 5	99.		5
-				7.		
				· ·		
FINANCE CO	OMMITTEE RECOMM	ENDATION:				
Approved:				Denied:		



Date:	May 5 2017	-				
Requestor:	Health Departmen	t			Sub Fund:	6
				10 N		(If applicable)
ncrease	Decrease	(circle one)		Amount:	\$5,562.60	
Type:	REVENUE					
	(Revenue, Expense, Fund B	alance, Reserve)				
account (fur	nd, number, name)	_101_	43190	Other General Service	e Charges	
ine item (n	umber & name)					
ncrease	Decrease	(circle one)		Amount:	\$5,562.60	
Гуре:	Expense					
JP3	(Revenue, Expense, Fund E	Balance, Reserve))			
Account (fu	nd, number, name)	101	55110	Local Health Center		
ine item (n	umber & name)	307		Communication	\$1,000.00	*
omo nom (n	amour as manney	355		Travel	\$1,800.00	
		452		Utilities	\$1,000.00	
		599		Other Charges	\$1,762.60	
	endment (be specific): I in line items that no	eeded more	funds to co	over fiscal year.		,
						2
FINANCE CO	OMMITTEE RECOMM	ENDATION:				
Approved:				Denied:		



Date:	17-May-17	-				
Requestor:	Health Departmen	t/Eloise Wa	ters		Sub Fund:	
						(If applicable)
INCREASE	/ DECREASE	(circle one)		Amount:	759.94	
Туре:	Revenue (Revenue, Expense, Fund E	salance, Reserve)				
Account (fur	nd, number, name)	101	46290	Public Safety Grant	(CarSeat Grant)	
Line item (n	umber & name)		-			
INCREASE Type:	Expense (Revenue, Expense, Fund Revenue)	(circle one)	5 E	Amount:	759.94	
Account (fur	nd, number, name)		55900	Car Seat Grant		
Line item (n	umber & name)	435	-	Office Supplies		
Carlo de Car	ndment (be specific): y to purchase Car S	eats				
			¥			
FINANCE CO	MMITTEE RECOMM	ENDATION:				
Approved:				Denied:		

(jdy

Date:	5-19-17	_			•
Requestor:	Elois	2 Waxe	s	Sub Fund:	(if applicable)
					(и аррисаеле)
INCREASE /	DECREASE	(circle one)	Amour	nt: \$ 18,100 . C	20
Туре:	Keve	ue-		_	
	(Revenue, Expense, Fund I	Salance, Reserve)	310 Hea	of Dept +) rognamic
Account (fund, Line item (num		<u>/01</u>	90 0 1 der	Dervid Sewa	horge
					4.
INCREASE A	DECREASE	(circle one)	Amou	nt: \$ 18,100,0	0
Туре:	(Revenue, Expense, Fund	Balance, Reserve)	L.		
Account (fund,	number, name)	101 551	90 other 14	earth Servirel	State)
Line item (num	ber & name)	131	\$ 400 -	Medical ber	sonnel
Line item (num		133	13,692-	Parafessio	nels
Line item (num		204	2,465 -	State Rex	rieman
Line item (num	ber & name)	513	158	Workers Con	P
Line item (num	lber & name)	-			
Description of	amendment (be spe	cific):	el a pa	n der Rent	ernance,
Money	1 to lie	used	to paid	andany 1	irrees
and/	Son a on	a time	tropus	acon ding	9/0-
page	Wane !	J	and Jac	1	
FINANCE COMM	MITTEE RECOMMEN	DATION:			
Approved:		De	enied:	Date: _	



Date:	1-May-17					
Requestor:	Bradley County EM	A			Sub Fund:	101
						(If applicable)
INCREASE	/ DECREASE	(circle one)		Amount: \$	506.62	
Туре:	Expense (Revenue, Expense, Fund Bala	nce, Reserve)				
Account (fun	d, number, name)	101	54410	Emergency Management Ag	gency	
Line item (nu	ımber & name)	338	_	Maint/Repair Svcs Vehicles		
INCREASE	/ DECREASE	(circle one)		Amount: \$	506.62	
Туре:	Revenue (Revenue, Expense, Fund Bala	nnce, Reserve)				
Account (fun	nd, number, name)	101	49700	Insurance Recovery		
Line item (nu	umber & name)		-			
Description of	of amendment (be spec	cific):				
Insurance rei	imbursement for hail o	lamage to 200	08 Ford			
	32 for 506.62 from VF	IS				
Increase 338	to pay for repairs					
FINANCE CO	MMITTEE RECOMMEN	DATION:				
Approved	d:		Denied:		Date:	

Date:	12-May-17	_			
Requestor:	Bradley County EMA		Ĭ.		Sub Fund:
					(If applicable)
INCREASE	/ DECREASE	(circle one)		Amount: \$	4,000.00
Type:	Revenue (Revenue, Expense, Fund Balance	, Reserve)			
Account (fun	nd, number, name)		44120	Tower Revenue	
Line item (nu	umber & name)		_		
INCREASE	/ DECREASE	(circle one)		Amount: \$	4,000.00
Туре:	Expense (Revenue, Expense, Fund Balance	, Reserve)			
Account (fur	nd, number, name)	101	54410	Emergency Management A	gency
Line item (ni	umber & name)	504	-	Indirect / Tower	
Description of	of amendment (be specif	ic):			
	dgeted Tower Revenue d 800 Mhz Repeater Site		n City of Clev	reland to assist with the compl	letion of the
-					
-					
FINANCE CO	MMITTEE RECOMMENDA	TION:			101 1
Approved	d:		Denied:		Date: 15 17



Date:	16-May-17					
Requestor:	County Commission	- Moultrie			Sub Fund:	
					(If appl	olicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	80.00	
Туре:	Expense (Revenue, Expense, Fund Bala	nce, Reserve)				
Account (fund, 1	number, name)	101	51100	County Commission		-
Line item (numb	oer & name)	599	_	Other Charges		
INCREASE /	DECREASE	(circle one)		Amount: \$	80.00	
Туре:	Expense					
	(Revenue, Expense, Fund Bala	nce, Reserve)				
Account (fund,	number, name)	101	51100	County Commission		
Line item (numb	ber & name)	337		Maintenance & Repair Serv	ices - Office	
Line item (numb	,		-			
The funds are no as next month's Finance Comminication of picture.	printing costs. Reaso ittee packet; Commiss	23 of last mon on for shortfall ion agenda pa	l: Commis ackets aver	ing costs to Cleveland Busines sion Office is now responsible rage size increased considerab rinted a number of budget requ	e for printing full ly this year with th	ne
	P					
FINANCE COMM	IITTEE RECOMMENDA	TION:		CASHIAN .	MLCOVE.	
Approved:			Denied:		Date:	



Date:	11-May-17	_			
Requestor:	Juvenile Court - Te	rry Gallaher			Sub Fund:((fapplicable)
INCREASE	/ DECREASE	(circle one)		Amount: \$	\$500.00
Туре:	Revenue (Revenue, Expense, Fund Bal	dance, Reserve)			
Account (fund	d, number, name)	101	44570	Contribution/Donation	
Line item (nu	mber & name)		.		
INCREASE	DECREASE	(circle one)		Amounf: \$	\$500.00
Type:	Expense (Revenue, Expense, Fund Bai	ulance, Reserve)			
Account (fun	d, number, name)	101	53500	Juvenile Court	
Line item (nu	umber & name)	599	. <u>-</u>	Other Charges	
	of amendment (be spe from Logan Thomps		program		

FINANCE COM	MMITTEE RECOMMEN	NDATION:	***		
Approved:			Denied:		Date:



Date: 5-May-17	=			
Requestor: Bradley Co Fire and	Rescue Sha	awn Fairbanks		Sub Fund:
•				(If applicable)
INCREASE / DECREASE	(circle one)		Amount: \$	250.00
Type: EXPENSI				
(Revenue, Expense, Fund Bala	ance, Reserve)			
Account (fund, number, name)	_121	54310	FIRE AND I	RESCUE
Line item (number & name)	422		FOOD SUI	PPLIES
Line item (number & name)				
Line item (number & name)				
INCREASE / DECREASE	(circle one)		Amount: \$	250.00
Type: REVENU	JE.		8	
(Revenue, Expense, Fund Ba		<u>*</u>		
Account (fund, number, name)	121	49961	DONAT	IONS
Line item (number & name) Line item (number & name)				
Description of amendment (be speci DONATION FROM LONZA	fic):			
FINANCE COMMITTEE RECOMMEND	ATION:			
Approved:		Denied:		Date:

Date: 5-May-17				
Requestor: Bradley Co Fire and R	escue Sha	wn Fairbank	S	Sub Fund:
	*	, , , , , , , , , , , , , , , , , , , ,		(If applicable)
Type: EXPENSE (Revenue, Expense, Fund Balance	e, Reserve)		Amount: \$	447.42
Account (fund, number, name)	121	54310	FIRE AND R	ESCUE
Line item (number & name) Line item (number & name) Line item (number & name)	338	-	Vehicle Maint.	And Repair
		-		
INCREASE / DECREASE (circle one)		Amount: \$	447.42
Type: REVENUE				
(Revenue, Expense, Fund Balance	e, Reserve)		_	
Account (fund, number, name)	121	49700	tInsurance	Kecovery
Line item (number & name) Line item (number & name)		-		<u> </u>
Description of amendment (be specific) Reimbursement for repairs on a trailer.):			
		QUI.		
FINANCE COMMITTEE RECOMMENDATI	ON:			
Approved:		Denied:		Date:



Date:	2-May-17				
Requestor:	Bradley Co Fire at	nd Rescue Sha	wn Fairbanks		Sub Fund:
					(If applicable)
INCREASE	/ DECREASE	(circle one)		Amount: \$	3,555.10
Type:	EXPEN	SE			
	(Revenue, Expense, Fund E	Balance, Reserve)			
Account (fund,	number, name)	121	54310	FIRE AND	RESCUE
Line item (num	nber & name)	338		Vehicle Main	t. And Repair
Line item (num	nber & name)		_		
Line item (num	nber & name)		_		
INCREASE	/ DECREASE	(circle one)		Amount: \$	3,555.10
Type:	REVEN	UE			
	(Revenue, Expense, Fund	Balance, Reserve)			
Account (fund	, number, name)	121	49700	KLYBURAN	C Becovery
)
Line item (nun Line item (nun					
Description of	amendment (be spe	cific):			
Reimbursemen	nt for hail damage to	a vehicle.			
FINANCE COM	MITTEE RECOMMEN	DATION:			
1			Denied:		Date:



Date:	28-Apr-17					
Requestor:	BRADLEY COU	NTY SHERI	FF		Sub Fund:	policable)
	14.00000A					7,,
INCREASE /	DECREASE	(circle one)		Amount: \$	5,520.00	
Гуре:	Revenue (Revenue, Expense, Fund	Balance, Reserve)		•		
Account (fund, Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb	er & name) er & name) er & name) er & name)	101	44530	Sale of Equipment		
Line item (numb Line item (numb	,					
INCREASE /	DECREASE	(circle one)		Amount: \$	5	,520,00
Туре:	Expense (Revenue, Expense, Fund	Belance, Reserve)				
Account (fund, Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb	oer & name) oer & name) oer & name) oer & name)	101	54210 422	Jail Food Supplies		5,520.00
INCREASE /	DECREASE	(circle one)		Amount: \$,520.00
Туре:	(Revenue, Expense, Fund	Balance, Reserve)				
Account (fund, Line item (numl Line item (numl						
Description of amendme	nt (too specific): HICLES ON GOV	DEALS				
	07 F	ORD CV #21	FAFP71W2			
	2FAFP71V88X14 ITTEE RECOMMEN		-	09 FORD CV #2FAHP71V1	9X100551	
Approved:	·			Denied:	Date	:

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Date:	2-May-17	_					
Requestor:	BRADLEY COUN	ITY SHERI	FF		 	Sub Fund:	(if applicable)
INCREASE /	DECREASE	(circle one)			Amount: \$		89.00
Туре:	Revenue (Revenue, Expense, Fund Ba	alance, Reserve)					
Account (fund, I Line item (numbe Line item (numbe Line item (numbe Line item (numbe Line item (numbe Line item (numbe	er & name)		44530	SALE OF S	SCRAP MATERIALS		
Line item (numb	er & name)						
INCREASE /	DECREASE	(circle one)			Amount: \$		89.00
Туре:	Expense (Revenue, Expense, Fund B	alance, Reserve)					
Account (fund, I Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb	er & name) er & name) er & name) er & name)	422	54210	JAIL FOOD SUI	PPLIES		89,00
							\$ 89.00
INCREASE /	DECREASE	(circle one)			Amount: \$		
	(Revenue, Expense, Fund B	alance, Reserve)					
Account (fund, Line item (numb Line item (numb	er & name)						
Description of amendmen	nt (be specific);						
Tenta vor cova a	Were DECOMBED	ATION					
Approved:	TTTEE RECOMMEND	ATION:		Denied:			Date:

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Date:	17-May-17	_				
Requestor:	BRADLEY COUN	ITY SHERII	FF		Sub Fund: _	(If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	291.70	
Туре:	Revenue (Revenue, Expense, Fund Br	alance, Reserve)				
Account (fund, Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb	ner & name)		43194	Service Charges LAKE FOREST MIDDLE		291.70
Line item (numb	•	(circle one)		Amount: \$	291.70	
Туре:	Expense (Revenue, Expense, Fund B.	alance, Reserve)		Amount. 3	271.70	
Account (fund, Line item (numbline i	oer & name) oer & name) oer & name) oer & name)	101 189 201 204 206 207	54110	Sheriff's Overtime Soc Sec State Retirement Life Ins. Medical Ins.		237.60 18.18 32.36 1.78 1.78 0.00 \$ 291.70
Description of amendme Reimb. Receive	nt (be specific): d for Deputics Work	cing Special	Detail			
FINANCE COMM Approved:	ITTEE RECOMMEND	ATION:		Denied:		Date:

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Date:	3-May-17				
Requestor:	BRADLEY COU	NTY SHERI	FF	Sub Fund:	
					(If applicable)
				1,000,50	
INCREASE /	DECREASE	(circle one)		Amount: \$ 4,208.50	
Туре:	Revenue				
1300.	(Revenue, Expense, Fund E	Balance, Reserve)			
A (6 A	hou nama)	101	43194	Service Charges	
Account (fund, Line item (numb		101	43174	FIRST BAPTIST	4,208.50
Line item (numb					
Line item (numb	,				
Line item (numb					
Line item (numb	,				
Line item (numb	,				
Line item (numb	•				
Line item (numt	ber & name)				
TAICDEACE /	DECDEACE				
INCREASE /	DECREASE	(circle one)		Amount: \$ 4,208.50	
	-			Amount: \$ 4,208.50	
Type:	Expense				
	(Revenue, Expense, Fund I	Balance, Reserve)			
1 t (f 1	hau nama)	101	54110	Sheriff's	
	number, name)	101	34110	Overtime	2,812.48
Line item (numb		201		Soc Sec	215.15
Line item (numb		204		State Retirement	383,05
Line item (numl	•			Life Ins.	21.09
Line item (numl	•	206		Medical Ins.	21,09
Line item (numl	ber & name)	207		Communications	188.91
		307		Communications	100,71
		101	54210	Jail	
		335	34210	Maintenance & Repair-Building	188.91
		340		Medical & Dental Services	188.91
		422		Food Supplies	188.91
		422		rood Supplies	188.71
					\$4,208.50
					54,200.30
Description of amendme					
Reimb, Receive	ed for Deputies Wor	rking Special	Detail		
FINANCE COMM	ITTEE RECOMMEN	DATION:			
				Desired.	Data
Approved:				Denied:	Date:
l					



Date:	3-May-17	,				
Requestor:	BRADLEY COUN	TY SHERIF	īF		Sub Fund:	(If applicable)
INCREASE /	DECREASE	(circle one)		Amount:	935.85	
Туре:	Revenue (Revenue, Expense, Fund Bal	lance, Reserve)				
Account (fund, Line item (numb Line item (numb Line item (numb Line item (numb Line item (numb	er & name)	101	43194	Service Charges WALKER VALLEY HIGH		935.85
Line item (numb	er & name)	(circle one)				
Туре:	Expense (Revenue, Expense, Fund Ba	slance, Reserve)		Amount: \$		935.85
	number, name)	101 -	54110	Sheriff's		7/2 27
Line item (numb	,	201		Overtime Soc Sec		762.27 58.31
Line item (numb		204		State Retirement		103,83
Line item (numb		206		Life Ins.		5,72
Line item (numb	•	207		Medical Ins.		5.72
Line item (numb	der & Haine)	338		Vehicle Maintenance		0.00
		425		Vehicle Gasoline		0.00
INCREASE /	DECREASE	(circle one)		Amount: \$		935,85
	(Revenue, Expense, Fund B	alance, Reserve)				
Account (fund, Line item (num	,					
Description of amendme Reimb. Receive	nt (be specific); ed for Deputies Work	ing Special	Detail			
	HTTEE RECOMMEND	ATION:		Dorlot		Data
Approved:				Denied:		Date:



Date:	2-May-17	-			
Requestor:	BRADLEY COUN	ITY SHERIF	?F	Sub	Fund:(if applicable)
INCREASE /	DECREASE	(circle one)		Amount: 47	2.23
Туре:	Revenue (Revenue, Expense, Fund Ba	alance, Reserve)			
Account (fund, 1 Line item (numb TNCREASE) /	er & name)	(circle one)	43194	Service Charges WESTWOOD BAPTIST Amount: \$	472.23
Account (fund,	(Revenue, Expense, Fund B	nlance, Reserve)	54110	Sheriff's	
Line item (numb		189		Overtime	311.34
Line item (numb	,	201		Soc Sec	23.81
Line item (numb		204		State Retirement	42.40
Line item (numb	,	206		Life Ins.	2,34
Line item (numb	,	207		Medical Ins.	2,34
Line item (numo	ci ex name)	307		Communications	22,50
L		301		Communications	24,50
		101 335 340 422	54210	Jail Maintenance & Repair-Building Medical & Dental Services Food Supplies	22.50 22.50 22.50 472.23
			-		
Reimb. Received	nt (toe specific): if for Deputies Work	ing Special	Detail		
FINANCE COMMI	TTEE RECOMMEND	ATION:			
Approved:				Denied:	Date:



Date:	16-May-17	-				
Requestor:	BRADLEY COUN	Sub Fund:				
			•			(If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	44,627.87	
Туре:	REVENUE (Revenue, Expense, Fund Ba	lance, Reserve)				
Account (fund, 1	number, name)	101	49700	INSURANCE RECOV	/ERY	
Line item (numb	oer & name)		-			
INCREASE /	DECREASE	(circle one)		Amount: \$	44,627.87	
Type:	EXPENSE					
	(Revenue, Expense, Fund Ba	lance, Reserve)				
Account (fund,	number, name)	101_	54110	SHERIFF	****	
Line item (numb	•	338 101	54210	MAINTENANCE AND REPAIR SERVICES	S - VEHICLE	\$29,022.00
Line item (numl Line item (numl		335	J4210 - -	MAINTENANCE AND REPAIR SERVICES	s - BUILDING	\$15,605.87
MONIES FROM		HAIL DAM		HICLES. MONIES ARI IANCE NEEDS WITHI		FOR
FINANCE COMM	ITTEE RECOMMEND.	ATION:				
Approved:			Denied:		Date: _	



Date:	27-Feb-17	_			
Requestor:	BRADLEY COUN		Sub Fund: (If applicable)		
INCREASE /	DECREASE	(circle one)		Amount: \$	4,151.05
Type:	Revenue, Expense, Fund Bal	ance, Reserve)			
Account (fund,	number, name)	101	49700	INSURANCE RECOVERY	
Line item (num	ber & name)		_		
INCREASE /	DECREASE	(circle one)		Amount: \$	4,151.05
	(Revenue, Expense, Fund Bal				
Account (fund, Line item (num) Line item (num)	ber & name)	335	54210	JAIL MAINTENANCE AND REPAIR :	SERVICES - BUILDING
MONIES FROM	amendment (be specif M INSURANCE ON AINTENANCE NEE	HAIL DAM		HICLES. MONIES ARE BEIN	NG USED FOR
FINANCE COMM	AITTEE RECOMMENDA	ATION:			
Approved:			Denied:		Date:

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Date:	17-May-17	_			
Requestor:	BRADLEY COUN	TY SHERIF	F'S OFFICE	3	Sub Fund:
INCREASE /	DECREASE	(circle one)		Amount: \$	3,694.85
Туре:	(Revenue, Expense, Fund Bal	ance, Reserve)			
Account (fund,	number, name)		49700	INSURANCE RECOVERY	,
Line item (numl	ber & name)				
INCREASE /	DECREASE	(circle one)		Amount: \$	3,694.85
Туре:	(Revenue, Expense, Fund Bal	ance, Reserve)			
Account (fund,	number, name)	101	54210	JAIL	
Line item (num Line item (num	,	335.	-	MAINTENANCE AND REPAIR	SERVICES - BUILDING
MONIES FROM	amendment (be specif M INSURANCE ON AINTENANCE NEE	HAIL DAM		HICLES. MONIES ARE BEI	NG USED FOR
FINANCE COMM	ITTEE RECOMMENDA	ATION;			
Approved:			Denied:		Date:



Date:	3-May-17	_			
Requestor:	BRADLEY COUN	VTY SHERIFF		Sub Fund:	(If applicable)
INCREASE /	DECREASE	(circle one)	Amount: \$	1,000.00	
Туре:	REVENUE (Revenue, Expense, Fund B.	slance Records)			
Account (fund,		48610 101 44990	Donations other Local Revenue		1,000.00
Line item (numb					
Line item (numb					
Line item (numb	,				
Line item (numb	,				
Line item (numb		-			
INCREASE /	DECREASE	(circle one)	Amount: \$		1,000.00
Туре:	EXPENSE				
-51	(Revenue, Expense, Fund B	alance, Reserve)			
Account (fund,	number, name)	101 54110	SHERIFF		
Line item (numb	er & name)	355	TRAVEL		1,000.00
Line item (numb	er & name)				
Line item (numb	er & name)				
Line item (numb	er & name)				
Line item (numb	er & name)				
Line item (numb	er & name)				
					\$ 1,000.00
					φ 1,000.00
INCREASE /	DECREASE	(circle one)	Amount: \$		
Type:					
]	(Revenue, Expense, Fund I	Balance, Reserve)			
	number, name)				
Line item (numl					
Line item (numb					
Line item (numb	,				
Line item (numb					
Line nem (num	bei & name)	-			
Description of amendment DONATIONS	nt (be specific): TO HONOR GUAR	D			
FINANCE COMM	TITTEE RECOMMEND	DATION:			
Approved:	-		Denied:		Date:



Date:	15-May-17	_				
Requestor:	BRADLEY COUN	3	Sub Fund:			
						(If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	1,400.00	
Туре:	REVENUE (Revenue, Expense, Fund Bal	lance, Reserve)				
Account (fund, 1	number, name)	101	44570	CONTRIBUTIONS & GIFTS		
Line item (numb	per & name)		-			
INCREASE /	DECREASE	(circle one)		Amount: \$	1,400.00	
Туре:	EXPENSE (Revenue, Expense, Fund Bal	lance, Reserve)				
Account (fund,	number, name)	101	54110	SHERIFF		
Line item (numb	,	338	-	MAINTENANCE AND REPAIR SE	ERVICES - V	EHICLES
Ento nom (nom			_			
	mendment (be specif ATED BY LOCAL (FOR CAR I	DECALS.		
					**	
FINANCE COMM	ITTEE RECOMMENDA	ATION:	######################################			
Approved:			Denied:		Date: _	

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Date:	16-May-17	_			
Requestor:	BRADLEY COUN	ITY SHERIF	F'S OFFICE	<u> </u>	Sub Fund: ((f applicable)
			••••		(п аррисави)
INCREASE /	DECREASE	(circle one)		Amount: \$	8,752.00
Туре:	EXPENSE (Revenue, Expense, Fund Ba	slance, Reserve)			
Account (fund,	number, name)	101	54110	SHERIFF	
Line item (numl	oer & name)	356	_	TUITION	
INCREASE /	DECREASE	(circle one)		Amount: \$	8,752.00
Type:	EXPENSE				
	(Revenue, Expense, Fund B	alance, Reserve)			
Account (fund,	number, name)	101	54210	JAIL	
Line item (num		422	-	FOOD SUPPLIES	
Line item (num	ber & name)		-		
	mendment (be speci TO MOVE MONIE		R INMATE	FOOD EXPENSES.	
FINANCE COMM	ITTEE RECOMMEND	ATION:		1.000.00	
Approved:			Denied:		Date:



Date:	16-May-17					
Requestor:	BRADLEY COU	Sub Fund: (If applicable				
INCREASE	DECREASE	(circle one)		Amount: \$	7,718.47	
Туре:	EXPENSE (Revenue, Expense, Fund	Balance, Reserve)				
Account (fund,	number, name)	101	54110	SHERIFF		
Line item (num	ber & name)	355	-	TRAVEL		
INCREASE	/ DECREASE	(circle one)		Amount: \$	7,718.47	
Туре:	EXPENSE (Revenue, Expense, Fund	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num Line item (num		422		FOOD SUPPLIES		
	amendment (be spe		ER INMATE	E FOOD EXPENSES.		
FINANCE COMN	MITTEE RECOMMEN	DATION:				
Approved:			Denied:		Date:	



Date:	16-May-17					
Requestor:	BRADLEY COU	NTY SHERIF	F'S OFFICE	3	Sub Fund: (If applicable)	
INCREASE /	/ DECREASE	(circle one)		Amount: \$	391.00	
Туре:	EXPENSE (Revenue, Expense, Fund	Balance, Reserve)				
Account (fund,	number, name)		54110	SHERIFF		
Line item (num	ber & name)	336		MAINTENANCE AND REPAIR S	SERVICES - EQUIPMENT	
INCREASE /	/ DECREASE	(circle one)		Amount: \$	391.00	
Туре:	EXPENSE (Revenue, Expense, Fund	Balance, Reserve)				
Account (fund,	number, name)	101_	54210	JAIL		
Line item (num Line item (num	· ·	422	-	FOOD SUPPLIES		
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER INMATE FOOD EXPENSES.						
,						
FINANCE COMM	AITTEE RECOMMEN	DATION:				
Approved:	 		Denied:		Date:	

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Date:	16-May-17	_			
Requestor:	BRADLEY COU	NTY SHERIF	F'S OFFICE	<u> </u>	Sub Fund: ((Fapplicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	541.35
Туре:	EXPENSE (Revenue, Expense, Fund E	Balance, Reserve)			
Account (fund,	number, name)	101	54110	SHERIFF	
Line item (num	ber & name)	320		DUES AND MEMBERSHI	PS
INCREASE	DECREASE	(circle one)		Amount: \$	541.35
Туре:	EXPENSE (Revenue, Expense, Fund I	Balance, Reserve)			
Account (fund,	number, name)	101	54210	JAIL	
Line item (num Line item (num		422	-	FOOD SUPPLIES	
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER INMATE FOOD EXPENSES.					
		-			
FINANCE COMM	MITTEE RECOMMENI	DATION:			
Approved:			Denied;		Date:



Date:	16-May-17					
Requestor:	BRADLEY COU	NTY SHERIF	F'S OFFICE	3	Sub Fund: (If applicable)	
INCREASE /	DECREASE	(circle one)		Amount: \$	1,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund I	Balance, Reserve)				
Account (fund,	number, name)	101	54110	SHERIFF		
Line item (num	ber & name)	319	-	CONFIDENTIAL DRUG ENFO	RCMENT PAYMENTS	
INCREASE /	DECREASE	(circle one)		Amount: \$	1,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund I	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num	ber & name)	422	_	FOOD SUPPLIES		
Line item (num	ber & name)		-			
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER INMATE FOOD EXPENSES.						
Note that the state of the stat						
FINANCE COMM	IITTEE RECOMMENI	DATION:				
Approved:			Denied;		Date:	

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Date:	16-May-17					
Requestor:	BRADLEY COU	NTY SHERIF	FS OFFICE	<u> </u>	Sub Fund:	(If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	10,702.58	
Туре:	EXPENSE (Revenue, Expense, Fund E	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num	ber & name)	716	-	LAW ENFORCEMEN	NT EQUIPMENT	
INCREASE	DECREASE	(circle one)		Amount: \$_	10,702.58	
Type:	EXPENSE (Revenue, Expense, Fund I	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num Line item (num		340	-	MEDICAL AND DENTAL	L SERVICES	
	amendment (be spec TO MOVE MONI		ER MEDICA	AL EXPENSES ABOVE	THE AMOUNT	
BODGETED.						
						*** ************
FINANCE COMM	IITTEE RECOMMENI	DATION:				
Approved:			Denied:	•	Date:	

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Date:	16-May-17					
Requestor:	BRADLEY COU	NTY SHERIF	F'S OFFICE	<u> </u>	Sub Fund: ((frapplicable)	
INCREASE /	DECREASE	(círcle one)		Amount: \$	254.80	
Туре:	EXPENSE (Revenue, Expense, Fund E	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num	ber & name)	709	-	DATA PROCESSING E	QUIPMENT	
INCREASE /	DECREASE	(circle one)		Amount: \$	254.80	
Туре:	EXPENSE (Revenue, Expense, Fund I	Balance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num Line item (num		340	-	MEDICAL AND DENTAL S	ERVICES	
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER MEDICAL EXPENSES ABOVE THE AMOUNT BUDGETED.						
FINANCE COMM	IITTEE RECOMMENI	DATION:				
Approved:			Denied:		Date:	



Date:	16-May-17						
Requestor:	BRADLEY COUN	NTY SHERIF	F'S OFFICE	3		Sub Fund:	(If applicable)
INCREASE /	DECREASE	(circle one)		Amoun	t: \$	3,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund B	alance, Reserve)					
Account (fund,	number, name)	101	54210	JAIL			
Line item (numl	ber & name)	594	-	SPECIALIZED	MEDICAL -	EMPLOYE	ES
INCREASE /	DECREASE	(circle one)		Amoun	it: \$	3,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund E	salance, Reserve)					
Account (fund,	number, name)	101	54210	JAIL			
Line item (num	ber & name)	340		MEDICAL AND D	ENTAL SERV	ICES	
Line item (num	ber & name)		-				
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER MEDICAL EXPENSES ABOVE THE AMOUNT BUDGETED.							
			,,,,				
FINANCE COMM	IITTEE RECOMMENI	DATION:					
Approved:			Denied:			Date;	



Date:	16-May-17	_				
Requestor:	BRADLEY COU	NTY SHERIF	F'S OFFICE		Sub Fund:	(If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	4,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund B	alance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (numb	oer & name)	451	-	UNIFORMS		
INCREASE /	DECREASE	(circle one)		Amount: \$	4,000.00	
Туре:	EXPENSE (Revenue, Expense, Fund B	ralance December				
Account (fund,			54210	JAIL		
Line item (numl		340	-	MEDICAL AND DENTAL SEI	RVICES	
Line item (num	per & name)		-			
	mendment (be spec TO MOVE MONII		R MEDICA	L EXPENSES ABOVE TH	E AMOUNT	
FINANCE COMM	ITTEE RECOMMENI	OATION:				
Approved:			Denied:		Date:	

(0)

Date:	16-May-17	_				
Requestor:	BRADLEY COUN	ITY SHERIF	F'S OFFICE	3	Sub Fund: _	(if applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	639.06	
Туре:	EXPENSE (Revenue, Expense, Fund Ba	alance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (numl	ber & name)	355	-	TRAVEL		
INCREASE /	DECREASE	(circle one)		Amount: \$	639.06	
Type:	EXPENSE (Revenue, Expense, Fund B	alance, Reserve)				
Account (fund,	number, name)	101	54210	JAIL		
Line item (num Line item (num	•	340	-	MEDICAL AND DENTAL SE	RVICES	
	nmendment (be spec TO MOVE MONIE		ER MEDICA	L EXPENSES ABOVE TH	E AMOUNT	
FINANCE COMM	IITTEE RECOMMEND	ATION:				
Approved:			Denied:		Date:	



Date:	16-May-17				
Requestor:	BRADLEY COUN	ITY SHERIF	F'S OFFICE	<u> </u>	Sub Fund: (If applicable)
INCREASE /	DECREASE	(circle one)		Amount: \$	393.37
Type:	EXPENSE (Revenue, Expense, Fund Ba	alance, Reserve)			
Account (fund,	number, name)	101	54210	JAIL	
Line item (num	ber & name)	338	-	MAINTENANCE AND REPAIR	SERVICES - VEHICLES
INCREASE	/ DECREASE	(circle one)		Amount: \$	393.37
Type:	EXPENSE (Revenue, Expense, Fund Ba	alance, Reserve)			
Account (fund,	number, name)	101	54210	JAIL	
Line item (num Line item (num		340	<u>-</u>	MEDICAL AND DENTAL SE	RVICES
Description of amendment (be specific): REQUESTING TO MOVE MONIES TO COVER MEDICAL EXPENSES ABOVE THE AMOUNT BUDGETED.					
BUDGLILD.					
FINANCE COMN	MITTEE RECOMMEND	ATION:			
Approved:			Denied:		Date:



Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal. CONTACT PERSON: Placed a DEPARTMENT: Elections PHONE NUMBER: 728-7132 DATE: January 11.2017 List and describe each item to be declared scrap/surplus - List only one item per form except for matching computer sewer items. Complete Description - Include color, materials, measurements, condition, etc. operating system not supported Please Circle: Surplus or Scrap Serial Number:____ Original Price: \$ recycle who retimburse Asset Number: 3577 Current Value: \$_____ Elections basement annex/Notinuse Item Location (Building and/or Office): Does the item include memory? 465 If memory, date cleaned by department: 17.2015 Solutions Jan. 17, 2017 Disposition of Property Described Above Disposal Date: Price: Auctioned/Scraped by: 1-17-17

Department head/Elected official

Approved by:

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal.

DEPARTMENT: Data Processing	CONTACT PERSON: Sindson L. Horhick J.					
DEPARTMENT: Data Processing DATE: May 09, 2017	PHONE NUMBER: 433-138-7165					
List and describe each item to be declared scrap/surplus – <u>List only one item per form except for matching items.</u>						
Complete Description - Include color, material	ls, measurements, condition, etc.					
Ante Comp						
Serial Number:	Please Circle: Surplus or Scrap					
Asset Number: 14321	Original Price: \$					
Current Value: \$						
Item Location (Building and/or Office):	Tracke					
Does the item include memory?	If memory, date cleaned by department: May 2,2017					
/						
Disposition of Property Described Above						
Price: \$	Disposal Date:					
Auctioned/Scraped by:						
Approved by						
Approved by: Department head	/Elected official Date					

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal.

DEPARTMENT: Dala Processing DATE: May 9, 2017	CONTACT PERSON: Lindsy d. Hollink TI
DATE: Mry 9, 2017	PHONE NUMBER: 423- 728 -7165
	surplus - List only one item per form except for matching items.
	*
	8
Complete Description - Include color, material	s, measurements, condition, etc.
Pentium	4 sever
Serial Number:	Please Circle: Surplus or Scrap
Asset Number: 11344	Original Price: \$
Current Value: \$	
, ,	Insofal
Does the item include memory? yes	If memory, date cleaned by department:
/	
Disposition of Property Described Above	
Price: \$	Disposal Date:
Auctioned/Scraped by:	*
A recovered by	
Approved by: Department head	/Elected official Date

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal.

DEPARTMENT: Vah Processing	CONTACT PERSON: Kindson L. Hofhoak J
DATE: May 9, 2017	PHONE NUMBER: 423 - 728 - 7145
	surplus - List only one item per form except for matching items.
	s, measurements, condition, etc.
Dell 0	stiplex Computer.
Serial Number:	Please Circle: Surplus or Scrap
Asset Number:	Original Price: \$
Current Value: \$	
Item Location (Building and/or Office):	Inchire
Does the item include memory?	If memory, date cleaned by department: May 2, 2017
/	*
Disposition of Property Described Above	
Price: \$	Disposal Date:
Auctioned/Scraped by:	
Accessed	*
Approved by: Department head,	

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal.

DEPARTMENT: Data Processing	PHONE NUMBER: 473 - 728 - 7165
DEPARTMENT: Data Processing DATE: Mry 9, 2017	PHONE NUMBER: #23 - 728 - 7/45
	surplus - List only one item per form except for matching items.
	* *
Complete Description - Include color, material	s, measurements, condition, etc.
	tiplex Computer
Serial Number:	Please Circle: Surplus or Scrap
Asset Number:	Original Price: \$
Current Value: \$	
Item Location (Building and/or Office):	
Does the item include memory?	If memory, date cleaned by department:
Disposition of Property Described Above	
Price: \$	Disposal Date:
Auctioned/Scraped by:	
No. of the last of	
A	
Approved by: Department head	/Elected official Date

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Completed form must accompany budget amendment request.

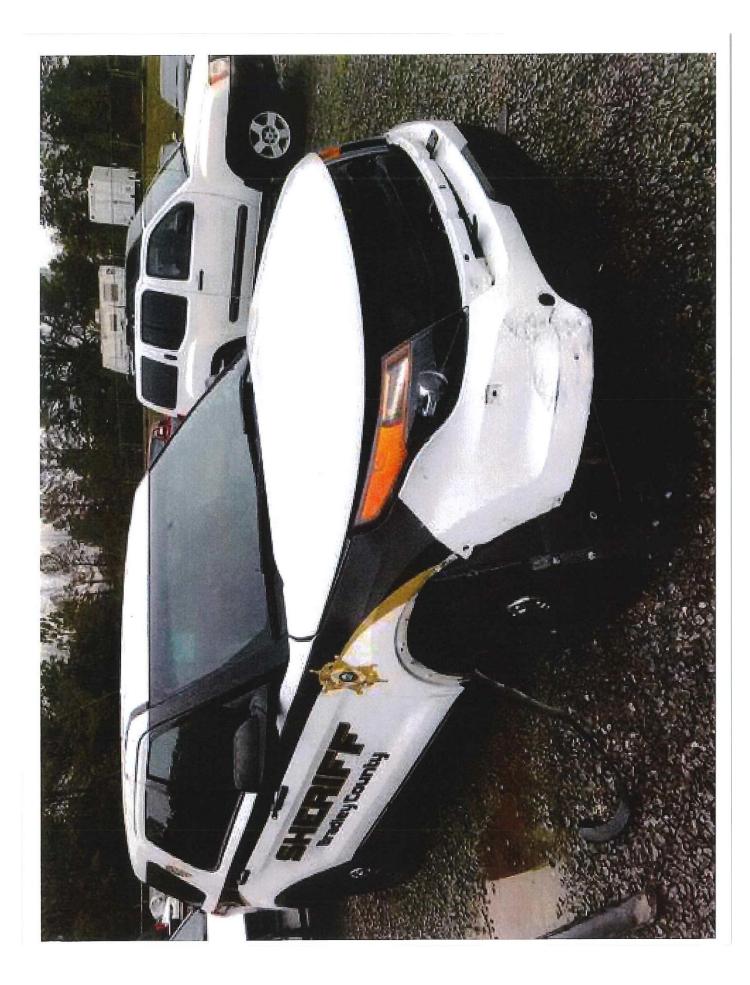
CHANGE OF VEHICLE STATUS FORM

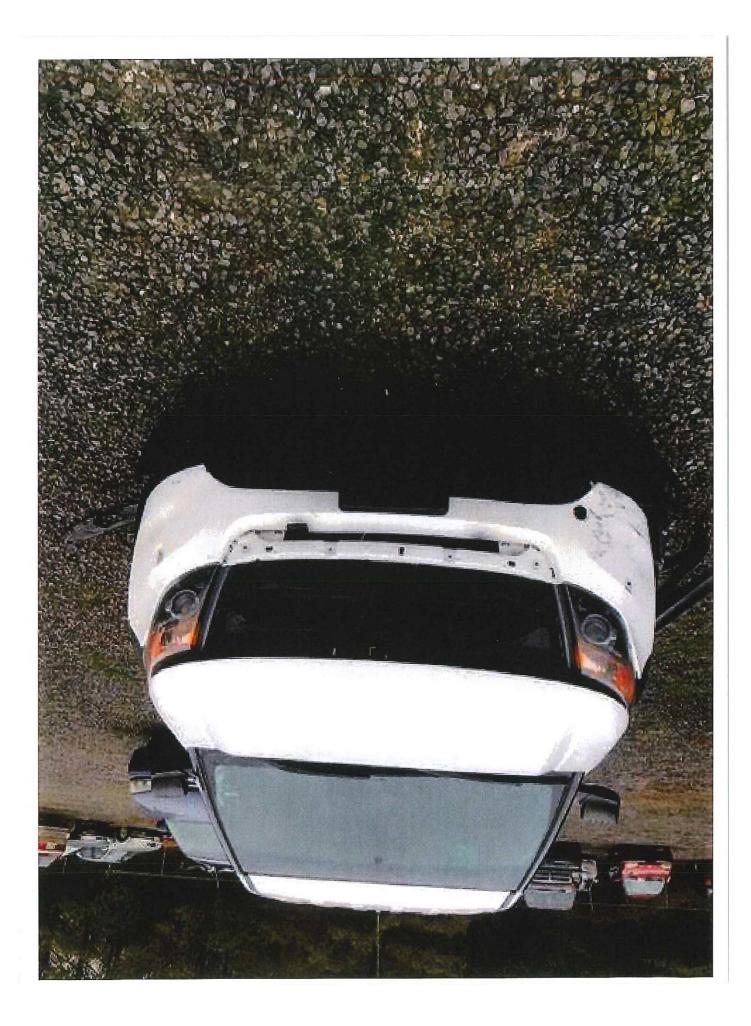
This form is to be completed when a vehicle is transferred or disposed of in accordance with Bradley County general fixed assets policies and procedures. After you have reached your assigned divisional vehicle allotment, each vehicle received by transfer or surplus without release of another vehicle in exchange constitutes a fleet increase for your division.

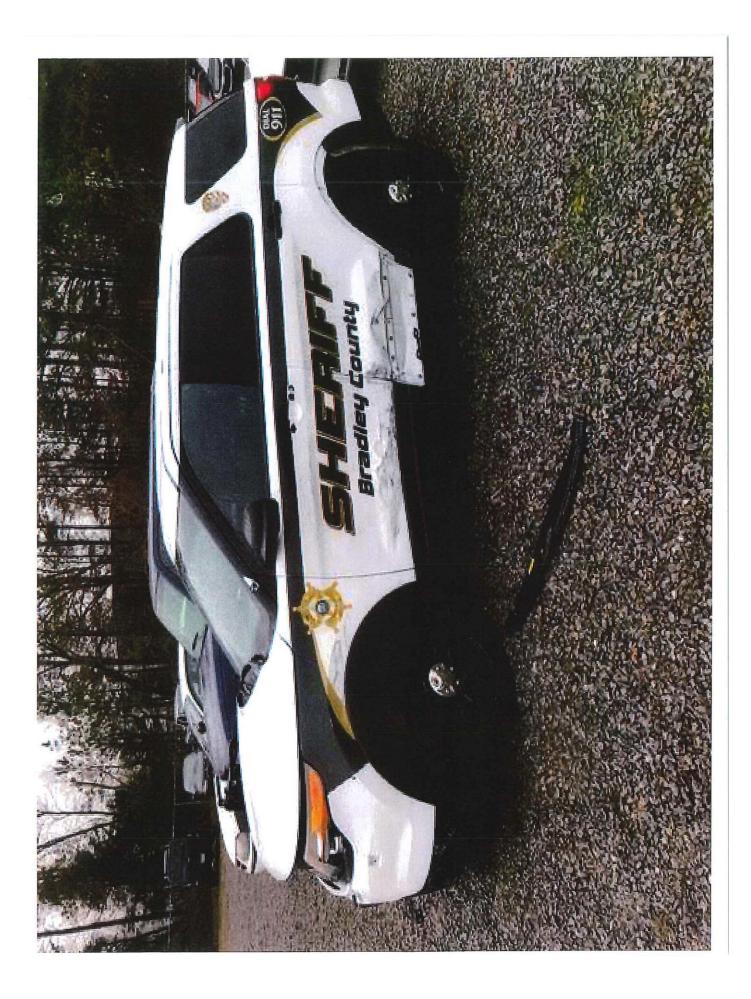
DEPARTMENT: B CSO	CONTACT PERSON: Richard Mcallister
DATE:	PHONE NUMBER: 433-506-3084
VEHICLE ACQUIRED: VIN NUMBER: 150	PHONE NUMBER: 423—506—2089 Salvage #. 15070/15368
TAG NUMBER: YEAR: 👌	1014 PRICE: 27, 131.41
MAKE: Ford	MODEL: EXPLOSES
	ACCOUNT/LINE:
If vehicle is acquired from another department, list t	he department:
	•
DISPOSED VEHICLE: VIN NUMBER: 15	15K8AR9 E GC38029 SSET #:
MILEAGE: 50338	DISPOSAL DATE:
If vehicle is transferred to another department, list the	e department:
If vehicle is disposed of as wrecked/scraped, please s	pecifically explain method of disposal and include
photographs:	
	A
Condition of vehicle: 1413 been stripe	sed of pants, selling salvase on
gov. deals	, ,
V	
Approved by: Pilal Ma	Wish 2/8/17
Department meady iso	cici omiciai Dato
Disposition of Property Described Above:	
Sale Price:	Date:
Prepared by:	

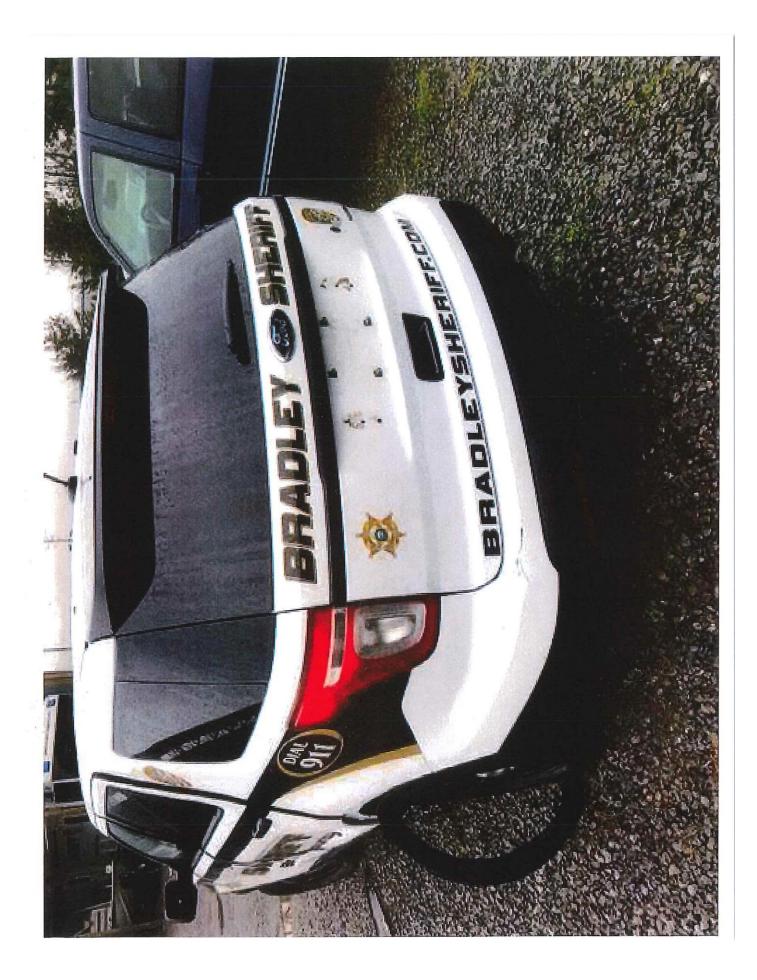
SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

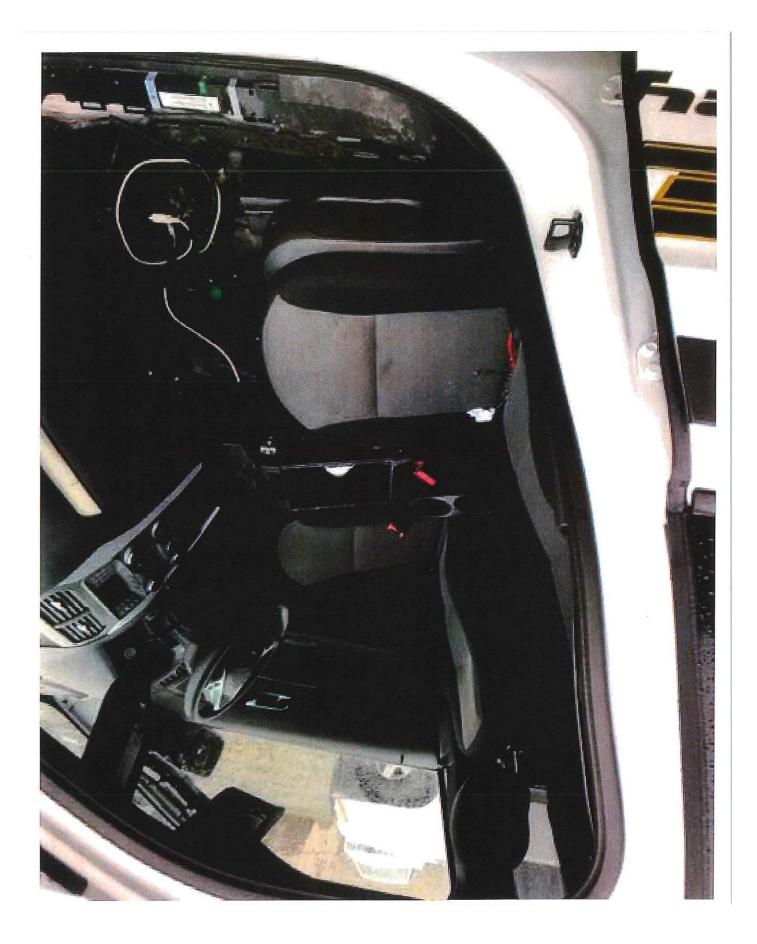
Must submit form to Finance Office/Purchasing one week prior to voting session.

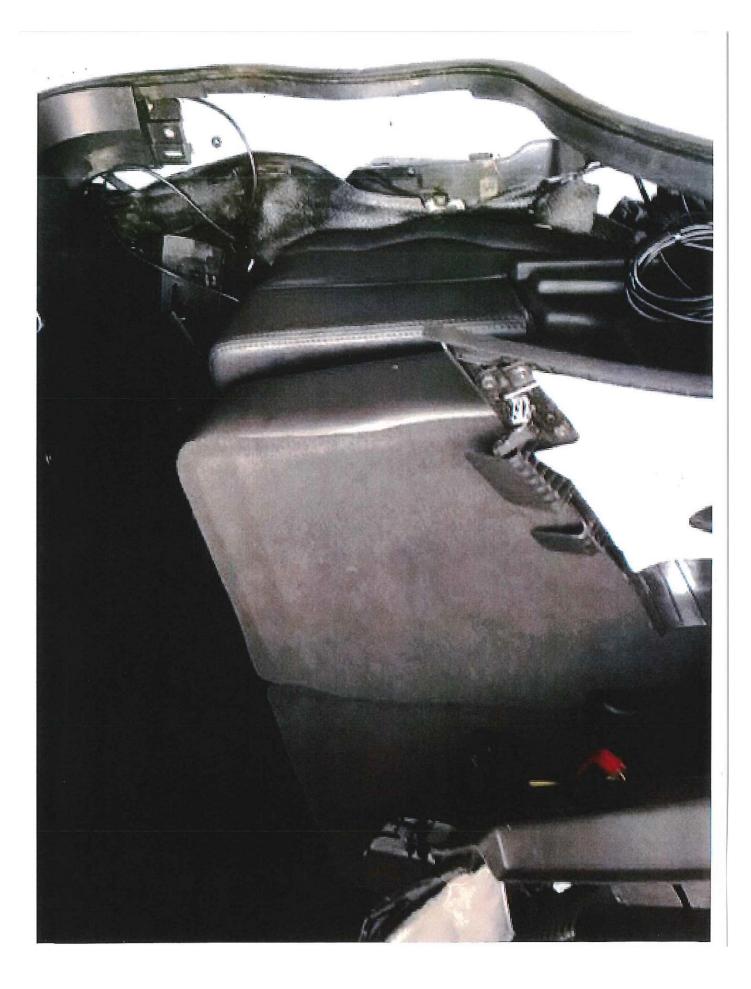












Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declarate property surplus or scrap and to make the property available for redeployment, sale or disposal.	laring
DEPARTMENT: Jovenile Det. 53500 CONTACT PERSON: Jeremy Ledford DATE: 5/25/17 PHONE NUMBER: (423) 728-7077 List and describe each item to be declared scrap/surplus — List only one item per form except for matching item	<u>18.</u>
Complete Description - Include color, materials, measurements, condition, etc. HP Pavillion Laptop	1
Serial Number: 2CE5230KBT Please Circle: Surplus on Scrap Asset Number: 11597 Original Price: \$ 1 841.00 Current Value: \$ 0 Item Location (Building and/or Office): IT Office Does the item include memory? Yes If memory, date cleaned by department: 5/22/17	
Disposition of Property Described Above Price: \$ Disposal Date: Auctioned/Scraped by:	*
Approved by: Department head/Elected official Date	

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradle property surplus or scrap and to make the property availa	ley County general fixed assets policies and procedures for declaring able for redeployment, sale or disposal.
DEPARTMENT: <u>Juvenile</u> Det. 53500 DATE: 5/25/17	
Complete Description – Include color, materials, in	neasurements, condition, etc. GE Washing Machine
Serial Number:	Please Circle: Surplus or Scrap Original Price: \$ 1,019.04
Item Location (Building and/or Office):	
Does the item include memory?	If memory, date cleaned by department:
Disposition of Property Described Above Price: \$ Auctioned/Scraped by:	Disposal Date:
Approved by: Department head/Elec	ceted official Date

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fixed assets policies and procedures for declaring property surplus or scrap and to make the property available for redeployment, sale or disposal. DEPARTMENT: Juvenile Det. 53500 CONTACT PERSON: Jeremy Ledford 5/25/17 DATE: PHONE NUMBER: (423)728-7077 List and describe each item to be declared scrap/surplus - List only one item per form except for matching items. Complete Description - Include color, materials, measurements, condition, etc. Dell Optiplex GX620 Non-functioning Serial Number: 44GGKBI Please Circle: Surplus or Scrap Asset Number: 11951 Original Price: \$ 1, 177. 61 Current Value: \$ 0 Item Location (Building and/or Office): IT Office Yes _____ If memory, date cleaned by department: ____ 5/23/17 Does the item include memory? Disposition of Property Described Above Price: \$ Disposal Date: Auctioned/Scraped by: Approved by: Department head/Elected official Date

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.

Note: For Vehicle Disposition Use "Change of Vehicle Status Form"

This form is to be completed in accordance with Bradley County general fix property surplus or scrap and to make the property available for redeployment,	ed assets policies and procedures for declaring sale or disposal.
DEPARTMENT: Juvenile Det, 53500 CONTACT PERS DATE: 5/25/19 PHONE NUMBE	CR: (423) 728-7077
List and describe each item to be declared scrap/surplus — <u>List only</u> one	tem per form except for matching items.
Complete Description – Include color, materials, measurements, condit	ion, etc. Dell Inspiron Laptop
Serial Number: JZKFH91 Please Circle: Surp	olus or scrap
Asset Number: 11831 Original Price: \$_1	330.29
Current Value: \$_O	
Item Location (Building and/or Office):	
Does the item include memory? Yes If memory, date of	leaned by department: _5/22/17
Disposition of Property Described Above	
Price: \$ Disposal Date:	
Auctioned/Scraped by:	
Approved by: Department head/Elected official	Date Date

SUBMIT THIS FORM TO: FINANCE OFFICE/PURCHASING

Must submit form to Finance Office/Purchasing one week prior to voting session.



RESOLUTION 2017-23

RESOLUTION AUTHORIZING BRADLEY COUNTY MAYOR TO NEGOTIATE AND ENTER INTO A CONTRACT WITH WRIGHTCORE, INC. REGARDING INFORMATION TECHNOLOGY SERVICES FOR BRADLEY COUNTY FOR A PERIOD OF ONE YEAR FOR A MONTHLY AMOUNT OF THREE THOUSAND FIVE HUNDRED DOLLARS (\$3,500.00) FOR MANAGED SERVICES AND ONE HUNDRED FIFTY DOLLARS (\$150.00) PER HOUR FOR EMERGENCY SERVICES.

WHEREAS, Bradley County is in need of information technology (IT) services; and

WHEREAS, the requested IT service was the subject of competitive bidding as required by Tennessee Law; and

WHEREAS, WrightCore, Inc. was the lowest and best bid for the requested IT services.

NOW, THEREFORE, BE IT RESOLVED by the Bradley County Legislative Body meeting in regular session at Cleveland, Tennessee, on this 19th day of June, 2017, that:

SECTION 1. Bradley County Mayor be and is hereby authorized to negotiate a one (1) year contract with WrightCore, Inc. for the provision of IT services to Bradley County for an amount of three thousand five hundred dollars (\$3,500.00) for managed services and one hundred fifty dollars (\$150.00) per hour for emergency services.

SECTION 2. Bradley County Mayor be and is hereby authorized following successful negotiation to enter into a one (1) year contract with WrightCore, Inc. for the provision of IT services to Bradley County for an amount of three thousand five hundred dollars (\$3,500.00) for managed services and one hundred fifty dollars (\$150.00) per hour for emergency services.

ADOPTED this 19 th day of June, 2017
Louie Alford, Chairman
Donna A. Simpson, County Clerk
D. Gary Davis, County Mayor

Bradley County HOME Grant Priority List

	··.	· ·	I	ľ					Over Income -\$906	Over Income -\$250
		Note							Over	Over !
	Total	Points	215	170	115	115	92	85		
	Children Structure	Points	70	40	35	40	0/	20		
	Children	Points	40	0	0	0	0	0		
Single	포	Points	0	0	0	0	0	0		
	Disabled	Points	0	10	10	0	0	0		
	# in HH Elderly	Points	0	30	0	10	0	01		
	# # #	Points Points	35	20	20	2	5	2		
	Income	Points	70	20	20	09	20	20		
		Zip	37323	37323	37323	37323	37323	37323	37323	37323
		City	Cleveland	Cleveland 37323	Cleveland 37323	Cleveland 37323	Cleveland 37323	Cleveland 37323	Cleveland 37323	Cleveland 37323
		Address	111 Greenhills Terrace SE	164 Pell Road SE	150 Carroll Lane SE	2360 Young Road SE	1525 Falcon Drive SE	1184 Humbard Road SE	112 Brown Drive SE	1925 Clayton Lane SE
		Last	Constance	Brown	Ellison	Sanders	Bennett	Davenport	Buchtel	Paul
		First	Jeffrey	Deborah	Elizabeth	Shirley	Tammera	Martha	Harley	Winston
		Title	Mr.	Mrs.	Mrs.	Mrs.	Mrs.	Mrs.	Mr.	Mr.
Total	Points/	Rank	215	170	115	115	95	85	0	0



RESOLUTION 2017-24 BRADLEY COUNTY BUDGET CONTINUATION RESOLUTION

Whereas, the Bradley County Commission has been delayed in collecting information necessary to definitely establish a final budget for fiscal year 2017-2018 prior to the commencement of such fiscal year on July 1, 2017; and

Whereas, the Commission desires to provide for the uninterrupted operation of the government of Bradley County by the continuation of the existing budget for fiscal year 2016-2017 and until a firm budget for the fiscal year 2017-2018 can be finally established.

Now, therefore be it resolved by the Bradley County Commission in REGULAR SESSION assembled, that the Commission hereby adopts as the budget for the operation of Bradley County and its various divisions, offices, departments and agencies for the fiscal year 2017-2018 until replaced and superseded by action of this Commission, the existing budget of Bradley County for the fiscal year 2016-2017 in its entirety; and

Be it further resolved that such interim budget shall become and be in full force and effect on July 1, 2017, and remain in effect until further action of the Commission.

Timo is day of Jane 2017.
Louie Alford, Chairman
Louie Alloid, Chaimhan
Donna A Simpson Country Cloub
Donna A. Simpson, County Clerk
D.C. D.'.CM
D. Gary Davis, County Mayor

This 19th day of June 2017



RESOLUTION 2017-25 RESOLUTION TO ESTABLISH THE METHOD OF ELECTION FOR MULTI-MEMBER DISTRICTS OF THE COUNTY COMMISSION

WHEREAS, *Tennessee Code Annotated,* Section 5-5-102, gives discretionary authority to the county legislative body to determine certain issues regarding the process of election for members of the county legislative body, and,

WHEREAS, subsection (h) of Section 5-5-102, provides that the county legislative body may determine whether each office in multi-member districts will be separately designated on the ballot, with candidates required to run and to be elected on the basis of such separately designated offices within the district, and,

WHEREAS, the county legislative body of Bradley County has determined that it is in the best interest of the legislative body and of the citizens of Bradley County to provide for such separate designation of offices in multi-member districts.

NOW, THEREFORE BE IT RESOLVED, by the county legislative body of Bradley County, Tennessee, meeting in regular session at Cleveland, Tennessee, that;

SECTION 1. For all public elections for members of the county legislative body of Bradley County following the effective date of this resolution, all offices in multi-member districts shall be separately designated on the ballot (e.g., offices shall be designated: District One, Seat A; District One, Seat B, and so on until proper designations are made for each seat in each multi-member district).

SECTION 2. All candidates for such offices shall indicate to the county election commission the specific seat for which they are running at the time of qualification. Pursuant to *Tennessee Code Annotated*, Section 5-5-102(h)(2), no candidate shall qualify for more than one (1) such separately designated seat within the district.

SECTION 3. This Resolution shall be effective upon its passage and approval, the public welfare requiring it and shall be effective for the 2014 election of the county legislative body and all such elections thereafter.

Adopted this 19th day of June, 2017.

Louie Alford, Chairman

Donna A. Simpson, County Clerk